

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Georgia Republican Party Inc.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Palmer, Geoffrey, H, ,

Mailing Address 270 N Canon Dr  
PHCity  
Beverly HillsState  
CAZip Code  
90210-5312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GH Palmer AssociatesOccupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2021

Transaction ID : A9934AB5EFAAC4992AF8

Amount of Each Receipt this Period

10000.00

☒ Memo Item

JFC Transfer - TBTH 2022

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Boles, Jason, , ,

Mailing Address 290 Jayne Ellen Way

City  
AlpharettaState  
GAZip Code  
30009-2314FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RTA StrategyOccupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2021

Transaction ID : AAA1D54B272604056AD1

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Braddy, Carroll, , ,

Mailing Address 2317 Forest Parkway

City  
MorrowState  
GAZip Code  
30260FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Education System ManagementOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 16 / 2021

Transaction ID : AD579EDEFB7F440A8B8D

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

500.00